COMBINED DECLARATION FOR DETENT APPLICATION AND POWER OF A CRNEY (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER HAMPT-1

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

		and sole inventor (if only one name is) of the subject matter which is claimed		
		FOR STORING HOLOGRAPHIC D HE CYLINDRICAL MEDIUM	ATA AND METHODS AND	APPARATUS FOR
the speci	fication of which (chec	k only one item below):		
	is attached hereto.			
	was filed as United S	tates application		
	Serial No.	·		
(=) (=)	on			
T)	and was amended			
	on (if app	licable).		
	was filed as PCT inte	rnational application		
	Number			
:: [])	on,			
7) 1)	and was amended und	ler PCT Article 19		
	on (if app	licable).		
i i		1 1 1 months of the		
	state that I have reviewed the first that I have reviewed the	ed and understand the contents of the a referred to above.	nbove-identified specification, i	ncluding the claims,
for conti	nuation-in-part applicat	se information which is material to paions, material information which become of the contraction of the cont	ame available between the fili	ng date of the prior
provisior internation also iden designati	nal application(s) and o onal application(s) design tified below any foreign ng at least one country	under Title 35, United States Code f any foreign application(s) for pate mating at least one country other than application(s) for patent or inventor other than the United States of Americation(s) of which priority is claim	nt or inventor's certificate or the United States of America li s certificate or any PCT interna ca filed by me on the same sub	365(a) of any PCT isted below and have ational application(s)
		GN/PCT APPLICATION(S) AND ANY PR	· · · · · · · · · · · · · · · · · · · ·	T
	COUNTRY T, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
	-			YES NO
				YES NO
			 	YES NO
			 	YES NO

POWER OF ATTORNEY: As a named inventor, I hereby appoint I. William Millen (19,544); John L. White (17,746); Anthony J. Zelano (27,969); Alan E.J. Branigan (20,565); John R. Moses (24,983); Harry B. Shubin (32,004); Brion P. Heaney (32,542); Richard J. Traverso (30,595); John A. Sopp (33,103); Richard M. Lebovitz (37,067); John H. Thomas (33,460); James E. Ruland (37,432); Nancy Axelrod (44,014); Jennifer J. Branigan (40,921); Robert E. McCarthy, (46,044); and Jonathan G. Brown (47,451) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Send Correspondence to:Customer No. 23599

Telephone No. 703/243-6333

Direct Telephone Calls to:



PATENT TRADEMARK OFFICE

2	FULL NAME OF INVENTOR	FAMILY NAME TEMPLE	FIRST GIVEN NAME Doyle	SECOND GIVEN NAME A.
0	RESIDENCE & CITIZENSHIP	CITY Hampton	STATE OR FOREIGN COUNTRY Virginia	COUNTRY OF CITIZENSHIP United States
	POST OFFICE ADDRESS	STREET 11 Fallmeadow Court	сттү Hampton	STATE & ZIP CODE/COUNTRY Virgina 23668 USA
(Z) (2)	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0 2 7	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
:	POST OFFICE ADDRESS	STREET	СІТҮ	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
!	POST OFFICE ADDRESS	STREET	спу	STATE & ZIP CODE/COUNTRY
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0 4	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	спу	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
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	POST OFFICE ADDRESS	STREET	СПТУ	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
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	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY





Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER HAMPT-1

2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
7	RESIDENCE & CITIZENSHIP	СІТҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	сптү	STATE & ZIP CODE/COUNTRY
2 0 8	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СПҮ	STATE & ZIP CODE/COUNTRY
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	RESIDENCE & CITIZENSHIP	СІТУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СІТҮ	STATE & ZIP CODE/COUNTRY

hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

| Signature of Inventor 201 | Date | Signature of Inventor 207 | Date | Da

I land	6/18/20	01	
SIGNATURE OF INVENTOR 202	DATE	SIGNATURE OF INVENTOR 208	DATE
SIGNATURE OF INVENTOR 203	DATE	SIGNATURE OF INVENTOR 209	DATE
SIGNATURE OF INVENTOR 204	DATE	SIGNATURE OF INVENTOR 210	DATE
SIGNATURE OF INVENTOR 205	DATE	SIGNATURE OF INVENTOR 211	DATE
SIGNATURE OF INVENTOR 206	DATE	SIGNATURE OF INVENTOR 212	DATE